

WHEN CAN I CONTINUE MY HEALTH INSURANCE?

Employers should contact Bill Tierney, Manager, Employer Services at 404-651-6140 Employees, should call the Eligibility Unit at 404-656-6322 or 800-610-1863

Leave your job with:	You can continue coverage:		
Less than 8 Years of Service	for up to 18 months under COBRA provisions		
Take another job that does not qualify			
you for coverage	By completing the paperwork and making payment within 60 days of coverage termination		
 Move to part-time status 			
Are laid off			
8 + but less than 10 Years of Service	• Submitting the appropriate form(s) within 60 days of when your coverage would end		
	 Paying the full cost of coverage, except subscribers 		
	under the Legislative Retirement System		
	Providing a statement from your employer verifying your service		
10 + years of service but before	Submitting the appropriate form(s) within 60 days of		
minimum age to qualify for an	when your coverage would end		
immediate retirement annuity AND	 Paying the full cost of coverage until your annuity 		
you leave your money in the retirement	begins		
system	Paying a lower health premium once your annuity		
	begins		
COBRA	May continue coverage for 18 months if loss of		
	coverage because of termination, layoff or reduction in hours		
	May add dependents within 31 days of a qualifying event		
WHEN YOU RETIRE	Are enrolled in the SHBP at time of retirement		
Are eligible to receive and are receiving	(Your insurance will automatically rollover into		
a monthly benefit from a Georgia-	retirement if enrolled in ERS, TRS or PSERS)		
sponsored retirement system and	• If the annuity will not be sufficient to deduct the		
	premium, coverage may be continued by paying a		
	monthly premium directly to the SHBP		
	NOTE: You cannot continue your health insurance if you take a lump sum distribution from a Georgia-		
	sponsored retirement and you do not receive a monthly		
	retirement benefit		

SHBP HEALTH OPTIONS			
•	Health Reimbursement Arrangement (HRA)	•	Open Access Plan (OAP)
•	High Deductible Health Plan (HDHP)	•	Health Maintenance Organization (HMO)

Medicare Advantage with Prescription Drug (MAPD) Private-Fee-For-Service Plan (PFFS)
(Medicare eligible retirees and/or their Medicare eligible dependents (age 65 or older or those
determined to be disabled by Social Security)